

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	sm		10/15/00
O.I.P.E. CLASSIFIER		21	10/15/00
FORMALITY REVIEW	HK	834	11/15/00
RESPONSE FORMALITY REVIEW	35	573	04-13-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	0
7	0
8	0
9	0
10	0
11	✓
12	✓
13	✓
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15	✓
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18	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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